

**Legislative Testimony  
Appropriations Committee  
Governor's Proposed FY 23 Budget Adjustments  
HB 5037 An Act Adjusting the State Budget for the Biennium Ending June 30,  
2023  
February 23, 2022**

Dear Senator Osten, Representative Walker, and Members of the Appropriations Committee,

My name is Dr. David Fenton. I have been practicing dentistry in Connecticut for over 15 years. I attended Dental School in Detroit, Michigan where I had a majority Medicaid dental population. I moved to Connecticut in 2006 to attend the University of Connecticut Oral and Maxillofacial Surgery residency program and Medical School. After graduating I worked at multiple dental offices including some with majority Medicaid patients. Since 2015 I have worked in my private practice, Bristol Oral Surgery and Implant Center, in Bristol, CT. Medicaid patients comprise approximately 30-40% of my patient population. I used to be a Medicare provider but eventually opted out due to the heavy administrative burden and extremely low reimbursement rates. I currently limit my Medicaid practice to under 21 years of age due to the extremely low reimbursement rates for beneficiaries 21 years of age and older. Furthermore, I am actively involved in the Dental Lifeline Network where I donate my dental services to patients in extreme need. Oral health is an inseparable part of a person's general health and well-being. Often, dental health has a broader impact on patients' well-being than medical disease because of its impact on eating, speaking, smiling, social interactions, employment opportunities; and the inability for a person to hide the consequences of dental disease that are generally more feasible with medical ailments. Additionally, there is a plethora of research showing the relationship between dental and systemic diseases such as diabetes, heart disease, and pregnancy to name a few.

I am writing in regards to the Governor's Proposed FY 23 Budget Adjustments for the Department of Social Services and the proposed increase to adult dental Medicaid reimbursement rates. This is about fair and appropriate reimbursement, not about greed or trying to make a major profit from treating adult HUSKY patients.

I, like most other Dentists in Connecticut chose Dentistry to promote oral health in our communities. The underserved, uninsured, low-income residents of Connecticut are in need of assistance to establish and maintain oral health. I would like to be part of the solution, and am not looking to make a large profit off of their treatment. I would merely like to be able to provide my services to these patients without losing money. A dental practice is quite costly to run due to the highly educated and experienced workforce, time requirements for patient care, and high cost of materials and technologies necessary to provide Dentistry at today's standard of care. Before the pandemic, and exacerbated by the pandemic's PPE, new office infection control needs, and workforce difficulties, the costs of dental services have continually been rising. The current children's fee schedule, though lower than the private networks reimbursement rates, is at least sufficient to meet the overhead required to provide those services. However, the

adult fee schedule does not even meet the actual costs to provide those services. There is clear historical evidence in Connecticut's Medicaid program that if the reimbursement rates are comparable, or modestly competitive with the private market, there will be an influx of Dentists enrolling in the program (J Am Dent Assoc 2015 Jan;146(1):52-60) which improves access to care and reduces disparities. There is also evidence that increasing adult reimbursement rates is particularly helpful for children's oral health (Health Aff (Millwood) 2021 Nov;40(11):1731-1739), specifically for children under 12 years of age. Furthermore, increasing adult reimbursement rates, and subsequent Dentist participation will help keep those patients out of the emergency departments where Dentists are not even available, but care is much more costly and less definitive (Health Serv Res. 2020 Jun;55(33):367-374).

My practice gets phone calls on a daily basis to seek Oral Surgery services for adult HUSKY patients. I see many children whose parents are HUSKY beneficiaries that inquire about becoming a patient of mine. It is heart breaking to have to tell them that I cannot help them. The only advice I can give these patients in need is to call Hartford Hospital dental clinic, Saint Francis Hospital dental clinic, UConn Health dental clinic, (all of which have service provided by Dental Students or Residents in training, and extremely long delays to get an appointment or other cumbersome obstacles to quality care) or Columbia Dental. This creates an unfair and unsustainable system where adult HUSKY patients do not have access to the same level of care other adult residents of Connecticut have. The Governor's FY 23 Budget Adjustments for the Department of Social Services and the proposed increase to adult dental Medicaid is a paramount initial step in improving access to care and decreasing oral health care disparities for Connecticut residents. I thank you for your time and thoughtful consideration of this important issue.

Respectfully Submitted,

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